PART B - FEE(S) TRANSMITTAL Complete and send this form, Logether v. . applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents SEP 2 2 2006 P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 INSTRUCTIONS: This cap should used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 06/29/2006 25270 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. EDWARD D GRIEFF HALE & DORR LLP 1455 PENNSYLVANIA AVE, NW WASHINGTON, DC 20004 (Depositor's name) (Signature) (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/612,014 07/03/2003 Richard A. Earl 102258.156US1 5448 TITLE OF INVENTION: NITROSATED NONSTEROIDAL ANTIINFLAMMATORY COMPOUNDS, COMPOSITIONS AND METHODS OF USE **SMALL ENTITY ISSUE FEE PUBLICATION FEE** APPLN, TYPE TOTAL FEE(S) DUE DATE DUE NO \$1400 09/29/2006 nonprovisional \$300 \$1700 **EXAMINER** ART UNIT CLASS-SUBCLASS SACKEY, EBENEZER O 1626 514-509000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Wilmer Cutler Pickering (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence 2 Hale and Dorr LLP Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the decement has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE (A) NAME OF ASSIGNEE NitroMed Inc. Lexington, MA Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 🖵 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee Publication Fee (No small entity discount permitted) A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-0219 (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above)

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☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Registration No. 53,212

September 22, 2006

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

Typed or printed name Belinda M. Lew

Authorized Signature

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